

## MISSOURI INDIVIDUAL INCOME TAX RETURN SINGLE/MARRIED (INCOME FROM ONE SPOUSE)—SHORT FORM

**2013** FORM MO-1040A

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LAST NAME FIRST NAME MIDDLE INITIAL DECEASED SOCIAL SECURITY NU 2013 2013							MBEF	R — — —		SOFTWARE VENDOR CODE (Assigned by DOR)					
SPOUSE'S LAST NAME FIRST NAME MIDDLE INITIAL DECEASED SPOUSE'S SOCIAL S							SOCIAL SE	CURIT	TY NUME	BER	000	)			
IN CARE OF NAME (ATTORNEY, EXECUTOR, PERSONAL REPRESENTATIVE, ETC.)										C	COUNTY	OF RESID	ENCE		
PRE	SENT	ADDRESS (INCLUDE APARTMEN	NT NO. OR RURAL	ROUTE)		CITY, TOWN, C	R POST	OFFIC	E, STATE, AN	ND ZIP COI	DE				
PI	PLEASE CHECK THE APPROPRIATE AGE 65 OR OLDER BLIND 100% DISABLED NON-C									-OBLI	OBLIGATED SPOUSE				
BOXES THAT APPLY TO YOURSELF YOURSELF SPOUSE.											OURS				
					☐ SPOUSE						_	<u> </u>			
岁		Federal adjusted gross inco	,		`			,			1				00
2		Any state income tax refund included in your 2013 federal adjusted gross income									2	-			00
											3	=			00
	4.	Mark your filing status box	below and er	iter the approp	oriate exemp	ion amount or	Line 4	4.							
		A. Single — \$2,100 (\$							oarate — \$	,					
		B. Claimed as a depe		her person's fe	ederal				arate (spo	use					
		tax return — \$0.00  C. Married filing joint fe		and Minneyeri	¢4 200		filing)		,200 old — <b>\$3,</b> 5	:00					
		Check which spous			- \$4,200				(er) with						
(0		Yourself S		•					<b>\$3,500</b>		4				00
DEDUCTIONS	5	Tax from federal return (Do	not	_	Enter this	amount on Lin	o 5 or ∮	5 000	whicheve	r ie leee					
Ĕ	٥.	enter federal income tax v				filing combine									
3			_			0, whichever is					5	+			00
吕	6.	Missouri standard deducti	on or itemized	deductions.	Single or Mari	ied Filing Sepa	arate—	\$6.10	00; Head o	f					
		Household — \$8,950; Marr	ied Filing a Cor	mbined Return	or Qualifying	Widow(er) —									
		older, blind, or claimed as									_	١.			00
	_	If you are itemizing, see ba									6	+			00
	7.	Number of dependents you claimed on your Federal Form 1040 or 1040A, Line 6c (Do not include yourself or your spouse.) x \$1,200 =										+			00
	0	(Do not include yourself or your spouse.) x \$1,200 =										+			00
		. Total Deductions — Add Lines 4 through 8													00
											10	=			
'AX		Missouri Taxable Income — Subtract Line 9 from Line 3      Tax — Use the tax table on the back of this form to figure the tax													00
	11.	lax — Use the tax table o	on the back of	this form to fig	ure the tax						11				00
	12.	Missouri tax withheld from	your Forms V	V-2 and Forms	s 1099. Attac	ch copies of Fo	orms V	V-2 an	nd Forms 1	099	12				00
		Any Missouri estimated tax payments made for 2013 (include overpayment from 2012 applied to 2013)													00
	14.	Total Payments — Add Lines 12 and 13													00
	15.	If Line 14 (Total Payments) is more than Line 11 (Total Tax), enter the difference (amount of overpayment)													
		here. (If Line 14 is less than Line 11, skip to Line 19.)									15				00
REFUND		Amount from Line 15 that you want applied to your 2014 estimated tax.								16				00	
副	17.	Enter the amount of your donation in	ildren's Veterans Elderly Home Nationa		(Wo	kers (L5AD)			General			LIFE Addit			
Œ		or your donation in		Missouri tional Guard Wo	orkers' Childhood	Missour Military			After School	1 2	Nissowri	Fund Code (See Instr.			
		to the right. See the	t Fund Trust Fund	Delivered Meals 7 Trust Fund	Trust Fund Memor	ial Fund Lead Testin Fund	Testing Family Rel	y Relief Revenue	Revenue Fund	Retreat Fund		gan Donor gram Fund		_	
		instructions for fund codes 17.	00 0	0 00	00	00 0		00	1	0		00	!	00	00
	1Ω	REFUND - Subtract Lines				1					ľ	'	, ,		1
	10.	Department of Revenue					iiiu. Si	igii be	and n	iaii io.					
		Check the box if you want					Line 1	18	🗌 De	bit Card	18				00
Щ	10	AMOUNT DUE - If Line 14													+
直	19.														
S	Sign below and mail to: Department of Revenue, P.O. Box 329, Jefferson City, MO 65107-0329.  See instructions for Line 19								19				00		
AMOUNT DUE	If yo										be p	resente	d again el	ectronic	ally.
₹	If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid m  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief														
	prepa	rer (other than taxpayer) is based on a	Ill information of which	h he or she has any	knowledge. As pr	ovided in Chapter 14	3, RSMo	, a pena	Ity of up to \$50	0 shall be in	nposed	on any ir	ndividual who	o files a friv	olous
	return. I also declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption														iens.
URE	I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm. YES NO										'KEPARI	ER'S PHON	<b>1</b> ⊏		
SIGNATUR		· · · · · · · · · · · · · · · · · · ·	- "-	_	VV)	DDEDARER'S	CICNIAT	LIDE			[		)		
<u>G</u>	SIGNATURE DATE (MMDDYYYY) PREPARER'S SIGNATURE											IN, SSN, O	'n PIIN		
S	SPOUSE'S SIGNATURE (If filing combined, BOTH must sign) DAYTIME TELEPHONE PREPARER'S ADDRESS AND ZIP CODE											DATE (MAN	יייייחח	1	
	J- 00	SES SIGNATIONE (II IIIIIIII COMBINED	, וועסנ און ווועסנ און ווועסנ און ווועסנ און ווועסנ	PATTINE TELEP	LICIAL	I HEFAREN S	ישטטטבי	JU ANL	211 OODE		DATE (MMDDYYYY)				
										/ /					

Misser	Manasia ad D	
MISSOIIL	ITEMIZER I	eductions.

- Complete this section only if you itemized deductions on your federal return. (See the information on page 7.)
- Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A.
- If you are subject to "additional Medicare tax", attach a copy of Federal Form 8959.

1. Total federal itemized deductions from Federal Form 1040, Line 40	1	00
2. 2013 Social security tax	2	00
3 2013 Bailroad retirement tax — (Tier I and Tier II)	3	00

- 00 4. 2013 Medicare tax. See instructions on page 9...... 5 00
- 6 00
- 7. State and local income taxes. From Federal Schedule A, Line 5 or see the worksheet below.
- 8. Earnings taxes included in Line 7. See instructions on Page 9...... 00
- 00 9. Net state income taxes. Subtract Line 8 from Line 7 or enter Line 8 from worksheet below...... 9 10. MISSOURI ITEMIZED DEDUCTIONS - Subtract Line 9 from Line 6. Enter here and on front of form, Line 6 . . . . . . . . 10 00

Note: If Line 10 is less than your federal standard deduction, see information on pages 6 & 7.

## Worksheet For Net State Income Taxes, Line 9 of Missouri Itemized Deductions

Complete this worksheet only if your federal adjusted gross income from federal Form 1040, Line 37 is more than \$300,000 if married filing combined or qualifying widow(er), \$275,000 if head of household, \$250,000 if single or claimed as a dependent, or \$150,000 if married filing separate. If your federal adjusted gross income is less than or equal to these amounts, do not complete this worksheet. Attach a copy of your Federal Itemized Deduction Worksheet (Page A-12 of Federal Schedule A instructions).

Enter amount from Federal Itemized Deduction Worksheet, Line 3		
(See page A-12 of Federal Schedule A instructions.) If \$0 or less, enter "0"	1	00
2. Enter amount from Federal Itemized Deduction Worksheet, Line 9 (See Federal Schedule A instructions.)	2	00
3. State and local income taxes from Federal Form 1040, Schedule A, Line 5	3	00
4. Earnings taxes included on Federal Form 1040, Schedule A, Line 5	4	00
5. Subtract Line 4 from Line 3	5	00
6. Divide Line 5 by Line 1	6	%
7. Multiply Line 2 by Line 6	7	00
8. Subtract Line 7 from Line 5. Enter here and on Missouri Itemized Deductions, Line 9, above	8	00

## 2013 Tax Table

If Missouri taxable income from Form MO-1040A, Line 10, is less than \$9,000, use the table to figure tax; if more than \$9,000, use worksheet below or use the online tax calculator at http://dor.mo.gov/personal/individual/.

If Line 1	0 is		If Line 1	10 is		If Line 1	0 is		If Line 1	0 is		If Line 1	0 is		If Line 1	0 is	
At least	But less than	Your tax is	At least	But less than	Your tax is												
0	100	\$ 0	1,500	1,600	\$ 26	3,000	3,100	\$ 62	4,500	4,600	\$109	6,000	6,100	\$167	7,500	7,600	\$238
100	200	2	1,600	1,700	28	3,100	3,200	65	4,600	4,700	113	6,100	6,200	172	7,600	7,700	243
200	300	4	1,700	1,800	30	3,200	3,300	68	4,700	4,800	116	6,200	6,300	176	7,700	7,800	248
300	400	5	1,800	1,900	32	3,300	3,400	71	4,800	4,900	120	6,300	6,400	181	7,800	7,900	253
400	500	7	1,900	2,000	34	3,400	3,500	74	4,900	5,000	123	6,400	6,500	185	7,900	8,000	258
500	600	8	2,000	2,100	36	3,500	3,600	77	5,000	5,100	127	6,500	6,600	190	8,000	8,100	263
600	700	10	2,100	2,200	39	3,600	3,700	80	5,100	5,200	131	6,600	6,700	194	8,100	8,200	268
700	800	11	2,200	2,300	41	3,700	3,800	83	5,200	5,300	135	6,700	6,800	199	8,200	8,300	274
800	900	13	2,300	2,400	44	3,800	3,900	86	5,300	5,400	139	6,800	6,900	203	8,300	8,400	279
900	1,000	14	2,400	2,500	46	3,900	4,000	89	5,400	5,500	143	6,900	7,000	208	8,400	8,500	285
1,000	1,100	16	2,500	2,600	49	4,000	4,100	92	5,500	5,600	147	7,000	7,100	213	8,500	8,600	290
1,100	1,200	18	2,600	2,700	51	4,100	4,200	95	5,600	5,700	151	7,100	7,200	218	8,600	8,700	296
1,200	1,300	20	2,700	2,800	54	4,200	4,300	99	5,700	5,800	155	7,200	7,300	223	8,700	8,800	301
1,300	1,400	22	2,800	2,900	56	4,300	4,400	102	5,800	5,900	159	7,300	7,400	228	8,800	8,900	307
1,400	1,500	24	2,900	3,000	59	4,400	4,500	106	5,900	6,000	163	7,400	7,500	233	8,900	9,000	312
Yourself/Spouse Example										9,000		315					

	Yourself/Spouse	<u>Example</u>	9,000 315
Missouri taxable income (Line 10) Subtract \$9,000	- \$ - \$ 9,000	\$ 12,000 <b>~</b> - \$ 9,000	If more than \$9,000, tax is \$315 PLUS 6
Difference	= \$ x 6%	= \$ 3,000 x 6%	percent of excess over \$9,000.
Tax on income over \$9,000Add \$315 (tax on first \$9,000)	+ \$ 315	= \$ 180 + \$ 315 = \$ 495	Round to nearest whole dollar and enter on front of form, Line 11.
	- Ψ	= φ 493	mont of form, Earlo 11.